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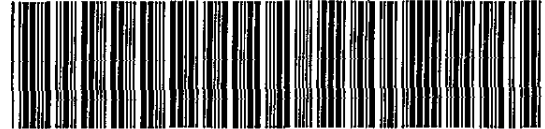
(Business Entity Name)

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TRANSMITTAL LETTER

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TALLAHASSEE, FLORIDA

TO: Registration Section
Division of Corporations

SUBJECT: HARDTOPS UNLIMITED, INC.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

GARY L. HULSLANDER

(Name of Person)

HARDTOPS UNLIMITED, INC.

(Firm/Company)

448 FAIRMONT TERRACE

(Address)

PORT CHARLOTTE, FL. 33954

(City/State and Zip code)

For further information concerning this matter, please call:

GARY HULSLANDER at (916) 801 1536

(Name of Person)

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☒ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee,
Certificate of Status &
Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

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IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. HARDTOPS UNLIMITED, INC.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. OREGON, USA 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10-9-87 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. UPON QUALIFICATION
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 448 FAIRMONT TERRACE PORT CHARLOTTE, FL 33954
(Principal office address)

SAME
(Current mailing address)

8. MARKETING MARINE COMPONENTS
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: GARY L. HULSLANDER

Office Address: 448 FAIRMONT TERRACE
PORT CHARLOTTE, Florida 33954
(City) (Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Gary L. Hulslander
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: TERRIE L. HULSLANDER
Address: 448 FAIRMONT TERRACE
PORT CHARLOTTE FL. 33954
Vice Chairman: GARY L. HULSLANDER
Address: 448 FAIRMONT TERRACE
PORT CHARLOTTE, FL. 33954
Director: Joseph B. Niles
Address: 448 Fairmont Terrace
Port Charlotte, FL. 33954
Director: _____
Address: _____

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TALLAHASSEE, FLORIDA

B. OFFICERS

President: TERRIE L. HULSLANDER
Address: 448 FAIRMONT TERRACE
PORT CHARLOTTE, FL 33954
Vice President: Joseph B. Niles
Address: 448 Fairmont Terrace
Port Charlotte, FL 33954
Secretary: GARY L. HULSLANDER
Address: 448 FAIRMONT TERRACE PORT CHARLOTTE FL 33954
Treasurer: GARY L. HULSLANDER
Address: 448 FAIRMONT TERRACE PORT CHARLOTTE FL. 33954

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Gary L. Hulslander
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. GARY L. HULSLANDER SECY/TREAS.
(Typed or printed name and capacity of person signing application)

CERTIFICATE

FILED

State of Oregon

OFFICE OF THE SECRETARY OF STATE
Corporation Division

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, **BILL BRADBURY**, Secretary of State of Oregon, and Custodian of the Seal of said State, do hereby certify:

HARDTOPS UNLIMITED, INC.

was

incorporated

under the Oregon

Business Corporation Act

on

October 9, 1987

and is active on the records of the Corporation Division as of the date of this certificate.

In Testimony Whereof, I have hereunto set my hand and affixed hereto the Seal of the State of Oregon.

BILL BRADBURY, Secretary of State



By

Debra L. Virag

Debra L. Virag

October 23, 2002